

Petitioner submission of 29 August 2023

PE2008/D: Provide Funding for a Separate Mental Health A&E for Children

Firstly, I would like to thank the Committee for the opportunity to share our view on the merit of the petition and to respond to the points answered by the Minister for Social Care, Mental Wellbeing and Sport.

Points one and five the Minister advised that they are working with their partner agencies such as the Police and Ambulance services to improve the unscheduled care pathways. This would mean that more intensive training would be required to be provided for both Police Officers and Paramedics who currently only receive Mental Health first aid and Mental Health assistance which is not adequate when dealing with a person in Mental Health Crisis. Can the Minister confirm if this will be the case as both services also have had significant cuts in staff? Therefore, can they also confirm how these partners will be able to provide the time and initial care for a person in crisis?

The Minister also advised and we agree that a person in crisis may require medical attention for injuries sustained and require monitoring or treatment. However, they are therefore meant to be seen by a psychiatric team which are not based within the hospital which has A&E. Could the Minister confirm how many patients who presented due to their Mental Health were able to be seen by the Psychiatric team as we have had a several hour wait due to the team not being based within the hospital. A person in Mental Health Crisis should be classed as severe at the same level as any serious physical issue and having teams based within the Acute hospitals would allow this. Can the Minister confirm how many psychiatric teams are available in Scotland compared to the current suicide and Mental Health statistics?

The Minister advised those in crisis should liaise with the available Mental Health Hubs within NHS24. Can the Minister confirm how many people made use of the hubs in the last 12 months and how many were under 12? We have sadly had many families reach out saying that they could not get through or if the child was under 12 they were advised that they could not help. Whereas a specific Mental Health A&E would offer

help and support to all children and adolescents, not only those over the age of 12.

Point two the Minister advised that the current number of Mental Health beds in Scotland in the period of 2021/2022 was 3,511 which is a reduction from 4,630 previously. The beds are currently split in the following ways:

- 60 of those beds are for children
- 336 for forensic psychiatry
- 1650 for general psychiatry
- 1465 for psychiatry of old age

In 2021/2022 the population of Scotland was 5,479,900 which was an increase of 13,900. Can the Minister advise if the number of beds available is sufficient for the growing population and what the current wait is for a Mental Health bed in Scotland? We fully understand that treatment has changed and more is done within the community setting.

Point 4 the Minister advised 74.2% of CAHMS patients started treatment within 18 weeks of referral and how every Health Board varies. Can the Minister advise why there are such variations across the Health Boards when they should have the required number of staff in the area the Health Board covers?

Could the Minister also advise why each Health Board logs the referrals differently? This became very evident when we submitted an FOI regarding the number of children awaiting assessment for ADHD and ASD. Three Health Boards so far have advised that this information is not available because referrals logged are not specified. Therefore how can the provided statistics be accurate.

Point 6 the Minister advised that deaths due to suicide had fallen and that they hoped to meet the 20% reduction by 2022, we are aware that the 2022 numbers have yet to be released but based on the previous numbers it is likely the 20% reduction won't be met. This is followed also by a report published in September 2022, Suicide among young people in Scotland which identified that between 2011 and 2020 probable suicides were the leading cause of death among 5–24-year-olds, accounting for a quarter of all deaths among that age group. Can the Minister confirm that these statistics are not concerning enough to warrant a 24/7 place such as a Mental Health A&E for Children?

Point 7 the Minister advised that the pilot services within Dundee and the Highlands are not equipped to work with children under 12 but that the portal has helpful information. Based on the statistics outlined above, can the Minister confirm what services are available besides the portal for children under the age of 12 who are significantly struggling?

We would like to thank the Minister for Social Care, Mental Wellbeing and Sport for their prompt and detailed response to the concerns we raised in our previous submission. We would also like to thank the Committee again for the opportunity to respond to the Minister's written submission and provide any further concerns.